PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10691883

CLAIMS AS FILED - PAR							5	SMALL ENTITY			OTHER THAN		
F	OTAL CLAIM		(Colum	(Column 1)		(Column 2)		TYPE		OR	OR SMALL ENTIT		
TOTAL CLAIMS			130	50			<u> </u>	RATE	FEE		RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	OR	BASIC FE	770.00	
TOTAL CHARGEABLE CLAIMS			30	3 Oninus 20= * (X\$ 9=	90	OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = *					X43=		OR	X86=		
М	JLTIPLE DEPE	NDENT CLAIM I	PRESENT					+145=				1 .	
* :	f the differenc	e in column 1 is	s less than a	ess than zero, enter "0" in column 2				TOTAL	1,70	OR	L	ļ	
CLAIMS AS AMENDED - PART II								TOTAL	43	OR			
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total-	*	Minus	**	,	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	_	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		7	+290=	.:	
							L	TOTAL	<u> </u>	OR	TOTAL		
		(Column 1)		(Caluma	- 0\	(Cal.,	Αľ	DDIT. FEE		JOR ,	ADDIT. FEE		
		CLAIMS		(Column		(Column 3)			T	,			
AMENDMENT B	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									107		<u> </u>	
	. •	,					Ŀ	+145=		OR	+290=		
	•	,	•	,			AD	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
٠,		(Column 1)		· (Column		(Column 3)							
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		<u>.</u> =		(\$ 9=		OR	X\$18=	· <u></u>	
	Independent	*	Minus	***		=	 	K43=			X86=		
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR	700=		
		•				•	+	145=	•	OR	+290=		
+ If	the intry in colum	nn 1 is less than th	e ntry in col	mn 2 weeks ***	سامط وأ	ma 2	L			• • •			
** If	the "Highest Nun	nn 1 is less than the nber Previously Pa mber Previously Pa	id For" IN THIS	S SPACE is les	ss than	20 enter "20 "	ADE	TOTAL DIT. FEE			TOTAL DDIT. FEE		